



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200  
Fax 613 632-5246

DAS  
21  
9-89

601.3073  
Job Sheet 184043



Part No: 601.3073

Job Qty: 8 ea

Part Name: Connector p/n 082-4440



Part Weight: 0 lbs

Status: New

Priority: Medium

Job Created: 10/2/18

Job Tracking No:

Due Date: 11/2/18

Created By: Marie Lajeunesse

Type: Stock

Description:

Note: DWG REV N/C SHEET 1

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation  | Qty   | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |           | Sign-off    |
|-------|------------|-------|------------|----------|-----------|---------|-----------------------|-----------|-------------|
|       |            |       |            |          | Setup hrs | Run Hrs | Workcenter / Supplier | Lead Time |             |
| 110   | Purchasing | 8 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | Purchasing            |           | NOV 10 2018 |
| 120   | Packaging  | 8 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | Packaging2            |           | NOV 10 2018 |
| 130   | QC         | 8 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | QC5                   |           | NOV 22 2018 |
| 140   | Packaging  | 8 pcs | 11/2/18    | 11/2/18  | 0.00      | 0.00    | Packaging3-1          |           | NOV 22 2018 |
| 150   | QC21-SA    | 8 Ea  | 11/2/18    | 11/2/18  | 0.00      | 0.00    | QC21                  |           | NOV 22 2018 |

Part Op 110 - Issue P/O: 41403 Possible supplier: Supplier P#: Material release note is required.

CL

OCT 22 2018

X12

### Job BOM

| Part / Item | Component Name | Quantity     | Operation      | Container |
|-------------|----------------|--------------|----------------|-----------|
| 082-4440    | Connector      | 8 pcs (1 ea) | 110-Purchasing | 5126621   |

### Job Allocations

| Operation      | Component Part | Required | Inventory | Allocated |
|----------------|----------------|----------|-----------|-----------|
| 110-Purchasing | 082-4440       | 8        | 0         | 0         |

### Part Specifications

Specifications could not be found.

Plex 10/2/18 9:02 AM Dart.lajeunesse.marie



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
CANADA  
TEL: 1 613 632-5200  
Email: sales@dartaero.com  
www.dartaerospace.com

Container No: S126622



Part: 601.3073

Job No: 184043

Serial No/Batch: S126622

Revision:

Inspector:

Exp Date:

Instructions:

Date: 11/10/18



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  |                       |                                                 |  |
|--------------------------------------------------------------|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|--|-----------------------|-------------------------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |                                                | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |                                                            | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                                               |  |                       |                                                 |  |
| Date :                                                       |                                                | Step #:                                                                                                                                                                            |                                                            | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  | MRB (QSI042) Approval |                                                 |  |
| Description Work Order Deviation                             |                                                |                                                                                                                                                                                    |                                                            | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                               |  |                       | Completed By                                    |  |
|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  |                       | Lead hand / Supervisor<br>Approval Verification |  |
|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  |                       | QC / QA Coordinator<br>Approval                 |  |
|                                                              |                                                |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  |                       |                                                 |  |
| <b>Root Cause</b>                                            |                                                | <b>FAULT CATEGORY</b>                                                                                                                                                              |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  |                       |                                                 |  |
| Environment <input type="checkbox"/>                         | No Re-verification <input type="checkbox"/>    | Pressure/Forced <input type="checkbox"/>                                                                                                                                           | Temperature/Cure <input type="checkbox"/>                  | Power Loss/Surge <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Positioned Wrong <input type="checkbox"/>     |  |                       |                                                 |  |
| Design <input type="checkbox"/>                              | Operator <input type="checkbox"/>              | Bending <input type="checkbox"/>                                                                                                                                                   | Set-up <input type="checkbox"/>                            | Folio/Program <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Outside Dimensions <input type="checkbox"/>   |  |                       |                                                 |  |
| Doc/Data <input type="checkbox"/>                            | Offset/Setup <input type="checkbox"/>          | Centre Not Concentric <input type="checkbox"/>                                                                                                                                     | BOM/Route <input type="checkbox"/>                         | Grain <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Over/Under tolerance <input type="checkbox"/> |  |                       |                                                 |  |
| Equip/Tooling <input type="checkbox"/>                       | Supplier <input type="checkbox"/>              | Cracks <input type="checkbox"/>                                                                                                                                                    | Broken/Damage/Defect <input type="checkbox"/>              | Weld <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Part Incorrect <input type="checkbox"/>       |  |                       |                                                 |  |
| Handling/Pre <input type="checkbox"/>                        | Training <input type="checkbox"/>              | Crimp/Kink/Ripple/Wave <input type="checkbox"/>                                                                                                                                    | Inspection Incomplete/Unqualified <input type="checkbox"/> | Wrong Stock Pulled <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Part Lost/Missing <input type="checkbox"/>    |  |                       |                                                 |  |
| Material <input type="checkbox"/>                            | Use for Testing <input type="checkbox"/>       | Cuffs <input type="checkbox"/>                                                                                                                                                     | Contamination <input type="checkbox"/>                     | Out of Sequence <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Part Moved <input type="checkbox"/>           |  |                       |                                                 |  |
| Internal Transport <input type="checkbox"/>                  | Poor Information <input type="checkbox"/>      | Crushing <input type="checkbox"/>                                                                                                                                                  | Countersink <input type="checkbox"/>                       | Off-set <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Drawing <input type="checkbox"/>              |  |                       |                                                 |  |
| Tribal Knowledge <input type="checkbox"/>                    | Rushing <input type="checkbox"/>               | Heat Treat <input type="checkbox"/>                                                                                                                                                | Cut Too Short <input type="checkbox"/>                     | Mislabeled <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Finish <input type="checkbox"/>               |  |                       |                                                 |  |
| LOA <input type="checkbox"/>                                 | Product Improvement <input type="checkbox"/>   | Wave/Twist in Tube <input type="checkbox"/>                                                                                                                                        | Instructions Incomplete/Unclear <input type="checkbox"/>   | Fit/Function <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Misread <input type="checkbox"/>              |  |                       |                                                 |  |
| Substation <input type="checkbox"/>                          | Process Improvement <input type="checkbox"/>   | Marks/Chatter <input type="checkbox"/>                                                                                                                                             | Drill Holes <input type="checkbox"/>                       | Misaligned/off center <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Turning Sequence <input type="checkbox"/>     |  |                       |                                                 |  |
| Past Expiry Date <input type="checkbox"/>                    | Manufacturing Process <input type="checkbox"/> |                                                                                                                                                                                    |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  |                       |                                                 |  |
| Misidentified <input type="checkbox"/>                       | Past Due <input type="checkbox"/>              | OTHER : _____                                                                                                                                                                      |                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                               |  |                       |                                                 |  |





Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200

# **PURCHASE ORDER** **PO041403**

**Supplier:** CRE002-VU  
Crestwood Technology Group  
1 Odell Plaza, Suite 139  
Yonkers, NY 10701 USA  
Phone: 1-866-779-0807  
Fax: 914-375-4508

**PO No:** PO041403

**PO Date:** 10/22/18

**Due Date:** 10/31/18

**Purchase Order**  
**Revision:**

**Revision Date:**

**Ship-To Contact:** Lavoie, Chantal  
clavoie@dartaero.com

**Ship To:** 1270 Aberdeen Street  
Hawkesbury  
ON  
K6A 1K7 Canada  
Phone: 613-632-5200

**Via:** Ground

**Pynt Terms:** Net 30

**Freight Terms:**

**Special Comments:** quote: 3295279

**MAILED**  
OCT 22 2018

## Items

| Line Item | Job    | Part     | Supplier Part No | Description | Status | Account | Due Date | Order Quantity | Received Quantity | Balance | Unit Price (USD) | Extended Price |
|-----------|--------|----------|------------------|-------------|--------|---------|----------|----------------|-------------------|---------|------------------|----------------|
| 1         | 184043 | 082-4440 |                  | Connector   | Firmed | -       | 10/31/18 | 12 pcs         | 0 pcs             | 12 pcs  | \$50.00/pcs      | \$600.00       |

**Line Item Note** AS PER DWG 601.3073

MIL SPEC'S FROM AMPHENOL M39012/05-0501 ACCEPTABLE

12 X NOV 10 2018

**Grand Total:** \$600.00

## Order Notes

### Procurement Quality Clauses

A005 RIGHT OF ENTRY

A007 FIRST-ARTICLE INSPECTION (FAI) BY SELLER, (DOCUMENTATION MAINTAINED BY SUPPLIER)

A016 PERSONNEL QUALIFICATION

A018 ELECTRICAL EQUIPMENT

A025 CERTIFICATE OF CONFORMANCE

A040 NOTIFICATION OF QUALITY ESCAPE

A041 QUALITY MANAGEMENT SYSTEM

A042 DART NOTIFICATION BY SUPPLIER

A043 RETENTION OF QUALITY DOCUMENTS

MAINTAIN DOCUMENTS ONLY FOR 15 YEARS.

A048 COUNTERFEIT PARTS AVOIDANCE, DETECTION, MITIGATION AND DISPOSITION PROGRAM

A049 SUPPLIER AWARENESS

Terms & Condition of Purchasing(Suppliers) and Procurement Quality Clauses are an integral part of our AS9100 requirements. To learn in detail, please visit [www.dartaerospace.com](http://www.dartaerospace.com) for further explanation.

Plex 10/22/18 8:03 AM dart.lavoie.chantal







# PACKING LIST

Crestwood Technology Group  
1 Odell Plaza  
Yonkers, NY 10701  
Phone - 914-779-3500  
Fax - 914-375-4508



|                  |            |
|------------------|------------|
| Shipment #       | 4076133    |
| Purchase Order # | PO041403 ✓ |
| Sales Order #    | 1074793 ✓  |
| Ship Date        | 11-08-18   |
| Page #           | 1 of 1     |

|             |        |                |           |             |            |           |
|-------------|--------|----------------|-----------|-------------|------------|-----------|
| Ship Via    | Terms  | Buyer          | Account # | Salespeople | Entered By | Warehouse |
| FDX INT PRI | NET 30 | Chantal LaVoie | 002786    | 001         | DANEEKA    | 01        |

**Sold To:**

DART AEROSPACE LTD  
1270 ABERDEEN STREET  
HAWKERSBUR, ON K6A 1K7  
CANADA

**Ship To:**

DART AEROSPACE LTD  
1270 ABERDEEN STREET  
HAWKERSBURY, ON K6A 1K7  
CANADA

**Phone:**

| LINE | ITEM # /<br>DESCRIPTION | CUSTOMER ITEM #<br>MANUFACTURER | U/M | QTY ORD | SHIPPED | CTG LOT # /<br>DATE CODE |
|------|-------------------------|---------------------------------|-----|---------|---------|--------------------------|
|------|-------------------------|---------------------------------|-----|---------|---------|--------------------------|

1 M39012/05-0501 ✓

EA

12 ✓

12 2190549

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Use Freight Account : 151793240

Your purchase order is further governed by the policies, terms, and conditions as set forth in the "Terms and Conditions" section of our website [www.ctg123.com/terms](http://www.ctg123.com/terms) at the time of your purchase. If you cannot access this website, please call us at (914) 779-3500, ext.122 and a written copy will be provided to you. Your failure to review the Terms and Conditions does not waive any of the terms or conditions.

**TERMS AND CONDITIONS OF SALE**

Crestwood Technology Group (CTG) considers all sales to be non-cancelable, non-returnable, and non-refundable and cannot be rescheduled. The only exceptions may be if a customer reports to us in writing, within 7 calendar days of ship date, that the goods received do not conform to the manufacturer's stated form, fit or function (failure report required). For any RMA issues, please visit our website for details; [www.ctg123.com/terms-of-sale](http://www.ctg123.com/terms-of-sale). RMA's will not be accepted without a specific RMA number provided by CTG.

FORM803-42 REVISION A 12/01/17







1 Odell Plaza  
Suite 139  
Yonkers, NY 10701-1402

(914) 274-6115 ph  
(914) 470-4037 fax  
quality@ctgnow.com

### Certificate of Compliance

|           |                    |            |  |                    |                    |  |  |
|-----------|--------------------|------------|--|--------------------|--------------------|--|--|
| Customer: | DART AEROSPACE LTD |            |  | Shipping Location: | HAWKERSBURY, ON CA |  |  |
| Part #:   | M39012/05-0501     | MFG:       |  | Lot No:            |                    |  |  |
| Qty:      | 12                 | Date Code: |  | Rev:               | N/A                |  |  |

It is hereby certified that all materials used in the manufacture of parts in the quantity called for on the subject purchase order conform to the material and or manufacturing specifications indicated in drawings or specifications as called for on said purchase order, and conform to the requirements of JESD 31 and JESD 625.

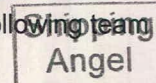
Kevin Patel  
Director of Compliance

### Quality Assurance Control Document

Customer Purchase Order #: PO041403

Ship Date: 11/08/18

The contents of this shipment are certified accurate in the count and product specifications by the following team members:



Inspected by: \_\_\_\_\_ Packed by: \_\_\_\_\_

Remarks:

DAS  
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We pride ourselves in our commitment to quality and 100% accuracy. In the event of a discrepancy please return a copy of this paper with a discrepancy report. All claims must be made in writing within 7 calendar days of receipt of product to be valid.

### Terms and Conditions of Sale

Crestwood Technology Group (CTG) considers all sales to be non-cancelable, non-returnable, and non-refundable and parts cannot be rescheduled. The only exceptions may be if a customer reports to us in writing, within 7 calendar days of receiving product, that the goods received a) are not the parts they ordered on their purchase order, or b) do not conform to the manufacturers stated form, fit or function for the product. For returns that we authorize with a Return Merchandise Authorization (RMA) in writing, CTG either will issue an in-house credit for a future purchase, replace the parts, or refund our client for the cost of goods purchased reflected on our invoice, at our sole discretion. CTG may charge a 25% restocking fee for parts that we authorize for a return (RMA). Our liability, resulting from the purchase or sale of any product, will always be limited to the cost of the goods purchased which is reflected on our invoice to the client. Your purchase order is further governed by the policies, terms, and conditions as set forth in the "Terms and Conditions" section on our website at [www.ctg123.com/terms-of-sale](http://www.ctg123.com/terms-of-sale) at the time of your purchase. If you cannot access the website, please call us at (914) 779-3500, ext. 122 and a written copy will be provided to you. Your failure to review the Terms and Conditions does not waive any of the terms or conditions.



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